

NON-REFUNDABLE APPLICATION FEE: \$25.00

Complete the following application, provide an event layout, and return the documents to the Marketing and Special Events Supervisor for the Town of Garner, 900 7th Avenue, Garner, NC 27529. To be considered, applications must be submitted at least 90 days prior to the event date. There is a non-refundable \$25.00 processing fee due for all submissions. Class A - C events require proof of insurance. Read the Special Events Policy for additional requirements.

DESCRIPTION

Event Title _____

Description
(This should be promotional in nature) _____

Event Category: ☐ Athletic/Recreation ☐ Concert/Performance ☐ Wedding Ceremony/Reception
☐ Exhibits ☐ Parade ☐ Race: Run/Walk ☐ Festival/Celebration
☐ Photography/Videography ☐ Other (Specify) _____

Anticipated Attendance Total _____ Per Day _____

Anticipated # of Vehicles Total _____ Per Day _____

DATE/TIME

Setup	Date _____	Time _____	Day of Week _____
Event Starts	Date _____	Time _____	Day of Week _____
Event Ends	Date _____	Time _____	Day of Week _____
Dismantle	Date _____	Time _____	Day of Week _____

LOCATION

Starting Location _____

Ending Location _____

Lake Benson Park ☐ #1 Shelter ☐ #2 Shelter ☐ #3 Shelter ☐ #4 Shelter ☐ Gazebo ☐ Amphitheater
☐ Trail ☐ Earth Mound Stage ☐ Other (Specify) _____

White Deer Park ☐ Greenway ☐ Front Lawn Adjacent to Aversboro Road ☐ Nature Center Lawn
☐ White Deer Loop Trail ☐ Other (Specify) _____

Other Park Name of Park: _____ ☐ Shelter _____ ☐ Other (Specify) _____

CONTACT

Host Organization _____

Public Contact (Required) _____

Non-Public Contact _____

(Required for internal use only)

Applicant Name _____

Address

Street _____

City _____

State _____

Zip _____

Web Address _____

E-mail Address _____

Telephone

Day _____

Evening _____

Fax _____

Cell _____

YES NO

☐ ☐ Is this an annual event? If so, how many years have you been holding this event? _____

☐ ☐ Is your event part of a larger marketing campaign (i.e. Relay for Life, Pony Tournament, etc.)?

If yes, please list _____

SITE PLAN/ROUTE MAP

You must submit a site/route map with your application which includes but is not limited to:

- ☐ An outline of the event area including the names of all street or areas that are part of the event and surrounding area. If the event involves moving route of any kind, indicate the direction of travel and all street or lane closures.
- ☐ The location of fencing, barriers and/or barricades. Indicate any removable fencing for emergence access.
- ☐ The location of stages, platforms, scaffolding, bleachers, grandstands, canopies, tents, canopies, portable toilets, booths, vendor areas, trash containers and dumpsters and other temporary structures.
- ☐ Generator locations and/or source of electricity.
- ☐ Placement of vehicles or trailers.
- ☐ Exit locations that are fenced.
- ☐ Other related event components not listed above.

NARRATIVE

Please provide a narrative and timeline of your event. You may provide this information as an attachment if necessary.

ENTERTAINMENT AND RELATED ACTIVITIES

YES NO

☐ ☐ Electricity Required?

☐ ☐ Are there any musical entertainment features related to your event?

If yes, complete the following information or provide an attachment listing all bands/performers, type of music, sound check and performance schedule.

Number of Stages_____

Number of Performers/Bands_____

Performer/Band name and music type_____

☐ ☐ Will sound amplification be used?

Please describe the electrical and sound equipment that will be used for your event_____

☐ ☐ Will inflatables or similar devices be used at your event?

If yes, please describe_____

☐ ☐ Will your event include the use of any signs, banners, decorations or special lighting?

If yes, please describe_____

☐ ☐ Will there be an admission fee for the event? If so, what is the admission price(s)?_____

☐ ☐ Will there be tents and/or canopies used at your event?

INSURANCE REQUIREMENTS

***Certificate of Liability Insurance naming the Town of Garner as additional insured for Class A - C events.**

Name of Insurance Agency _____

Address Street_____

City_____ State_____ Zip_____

Telephone Day_____ Evening _____ Fax_____ Cell_____

Contact Name _____

A certificate of liability insurance certificate with at least \$1,000,000 coverage per occurrence for bodily injury and property damage with an endorsement naming the Town of Garner, specifically and separately, as an additional insured under the policy is required for Class A - C events.

A certificate of insurance is to be provided to the town coordinator no less than 14 days prior to the scheduled event. If an event is approved, it will be approved pending receipt of the insurance certificate. See Special Events Special Events Policy for further information.

FOOD CONCESSION

YES NO

☐ ☐ Does your event include food concessions and/or preparation areas?

If yes, please describe how food will be served and/or prepared _____

YES NO

☐ ☐ Do you intend to cook food in the event area?

If yes, please specify method:

- ☐ Gas
☐ Electric
☐ Charcoal
☐ Other (specify) _____

FOOD CONCESSIONAIRES

YES NO

☐ ☐ Will items or services be sold at your event?

If yes, please describe or attach a complete list of vendors. _____

YES NO

☐ ☐ Will items or services be sold at your event present unique liability issues (e.g. animal rides, etc.?)

If yes, please describe or attach a complete list of vendors. _____

PORTABLE RESTROOMS

***Portable restrooms are required if more than 500 people will be at the event.**

YES NO

☐ ☐ Do you plan to provide portable restroom facilities at your event?

If yes, total number of portable toilets _____

Name of licensed provider: _____ Phone: _____ Website: _____

SANITATION AND RECYCLING

YES NO

☐ ☐ Town to provide final clean-up? *Additional fees apply.

If not, organizer will provide: Sanitation_____ Can Liners_____ Trash Haul Off_____ Other_____

Number of Trash Cans _____

Number of Dumpsters _____

(One for every increment 400 people)

Sanitation Company _____

Address Street _____

City _____ State _____ Zip _____

Telephone Day _____ Evening _____ Fax _____ Mobile _____

Equipment Setup: Date _____ Time _____

Equipment Pickup: Date _____ Time _____

Please describe your plan for cleanup and removal of recyclable goods, waste and garbage during and after your event.

MARKETING AND PUBLIC RELATIONS

YES NO

☐ ☐ Will this event be marketed, promoted or advertised in any manner?

If yes, please describe _____

Will there be live media coverage during the event?

If yes, please describe _____

AFFIDAVIT OF APPLICANT

I have carefully read and will abide by the Special Events Support Policy of the Town of Garner and swear or attest that statements I made herein are true and correct to the best of my knowledge and belief.

Signature is required before application is processed.

Print Name

Date

Signature